

Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date: 8/11/07
Case #: 43FZ5133
County: BARTHOLOMEW

Address: 3246 SUNBEL DR
COLUMBUS IN
47201

Type of Laboratory Seizure (check one)

- Operational Lab
 Chemical/Glassware/Equipment (only)
 Dumpsite (only)

Seizure Location (check all that apply)

- Residence Hotel/Motel
 Outbuilding Open - No Structure
 Vehicle Other:

Items Found: Location (bedroom, kitchen, open air, etc)

(check all that apply)

- Lithium/Ammonia Reaction(s): _____
 Red Phosphorous/Iodine Reaction(s): _____
 Flammable Solvents: _____
 Water Reactive Metal (Lithium): _____
 Anhydrous Ammonia: Cylinder w/ Air Valve System
 Hydrochloric Acid Gas Generator(s): _____
 Corrosive Acid: _____
 Corrosive Base: _____
 Other (item and location): _____

Child under age 18 discovered (check one)

- Yes 2 (number present)
 No

*If yes, fax report to Child Protective Services

Investigative Information

- Ephedrine/Pseudoephedrine Tracking Log
 Retail/Merchant Tip
 Other: Law Enforcement

This report is to be faxed to the following agencies that serve the location:

Fire Department: CFD
Health Department: Bart Co
Child Protection Service: _____

Fax: /
Fax: /
Fax: /
Faxed to PD for Delivery

For further information regarding this methamphetamine laboratory, contact
Investigating Officer: Ayers Phone 812-689-5000

** This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

*** This form is to be included with the case file, and a copy sent to the clandestine Laboratory Team Leader for retention.